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Genetics Plan Moves Toward Implementation

The Indiana Genetics Plan is in its final stage of development. It is projected to be completed by May 31, according to Roland Gamache, director of ISDH Data Analysis.

In advance of the plan's release, a Birth Defects Surveillance talk will be presented at the Indiana Government Center Auditorium by Larry Edmunds, director of the National Center on Birth Defects and Developmental Disabilities at the Centers for Disease Control and Prevention (CDC). Edmunds' talk is scheduled for April 30.

According to Gamache, birth defects surveillance is an important part of the State Genetics Plan because it will help the state discover most of the estimated 7,000 Hoosier children born each year with birth defects. He says that information about birth defects, when known, is recorded on birth certificates. However, for a variety of reasons, defects possessed by an estimated 50 percent of those babies are never recorded on birth certificates.

For example, if a medical report containing information about a birth defect is not ready when a birth certificate is created, that information about the defect doesn't get recorded or reported to the State Department of Health. Some defects go unrecorded because they don't surface until some time during the first year or two after birth. That's why the surveillance project that is supported by a federal grant will require reporting of all defects discovered up to age two, Gamache says.

The purpose behind gathering the data is to improve both the coverage and scope of health care provider interventions.

Gamache pointed out that ISDH already supports a number of interventions to reduce both infant mortality and developmental disabilities arising from birth defects that are either preventable or can be ameliorated if dis-



Roland Gamache, ISDH director of data analysis, has had an active role in preparing genetics grants for Indiana.

Photo by Daniel Axler covered soon enough.

They include activities by ISDH's Maternal and Child Health (MCH) programs, including Newborn Screening and follow-up. Other organizations providing effective interventions for chil-

ASTHO Visits Indiana to Develop Genomics Tool Kit

A visiting team from the Association of State and Territorial Health Officers (ASTHO) spent time with ISDH staff in interdisciplinary meetings in early April to learn how Indiana plans to use genetic data that it will collect.

ASTHO teams are visiting five state health departments in an information gathering effort to develop a Genomics Tool Kit to provide interested state health departments with resources for developing and implementing genetic planning.

The ASTHO team visited with representatives from the following ISDH program areas: Maternal and Child Health, Women's Health, Chronic Disease, Cancer Registry, Diabetes, and the Epidemiology Resource Center. They also visited with FSSA Children's Health Insurance Program (CHIP) staff.

dren include the March of Dimes, private practitioners, and the Indiana Family and Social Services Administration's First Steps program. Ensuring that more at-risk women receive adequate amounts of folic acid during pregnancy will be a first application of the new surveillance data, according to Gamache.

Data gathered through birth defects surveillance will be recorded by ISDH in a new birth defects registry. The data will begin to be collected under a new administrative rule, which is projected to be approved sometime this summer, Gamache says.

As more is learned about genetic predispositions that are risk factors for common chronic illnesses like cardiovascular disease and diabetes, Gamache believes the importance of genetics in public health will increase.

He says that Indiana is one of eight states to receive a federal birth defects surveillance grant. Both State Epidemiologist Bob Teclaw, D.V.M. and Gamache have demonstrated an active interest and participatory involvement in sharing and acquiring information at the national level in exchanges with the CDC.

A 15-member planning committee is responsible for producing the State Genetics Plan and has involved extensive work by Nancy Meade, MCH; Judith Ganser, M.D., MCH medical director; Scott Michalski, former MCH genetics specialist; and the following subcommittees: Data, Laboratory, Education, Ethical and Legal Issues, Clinical Reimbursement, and Screening. The committee is chaired by David Weaver, M.D., director of the Clinical Genetics Division at the Indiana University Medical Center.

Gamache says implemenation of the plan will move forward more quickly if approval of a federal grant application to support implementation is received in May.

Medical Laboratory Technology Week is April 14-20 in Indiana

→ Proclamation ←

WHEREAS, clinical laboratory professionals serve a vital role in every aspect of health care in Indiana; and

WHEREAS, these health professionals often work "behind the scenes," so the general public may not know much about the critically important testing that clinical laboratory scientists, medical laboratory technicians, and pathologists perform daily; and

WHEREAS, the staff at the Indiana State Department of Health's Laboratory Resource Center recently demonstrated an outstanding collaborative effort to quickly and accurately screen more than 1,200 samples submitted from throughout the state over a 90-day period for testing for anthrax; and

WHEREAS, it is appropriate to set aside time to honor and congratulate all Indiana State Department of Health employees who serve the citizens of Indiana through some aspect of the performance of laboratory testing or through regulatory oversight to assure that patients in Indiana receive quality care through quality laboratory testing; and

WHEREAS, April 14 – 20, 2002, has been declared National Medical Laboratory Technology Week to recognize and celebrate the approximately 265,000 medical laboratory professionals and 15,000 board certified pathologists who perform and interpret clinical laboratory tests in the United States;

NOW, THEREFORE, I, FRANK O'BANNON, Governor of the State of Indiana, do hereby proclaim April 14 – 20, 2002, as

MEDICAL LABORATORY TECHNOLOGY WEEK

in the State of Indiana, and invite all citizens to take due note of the observance.

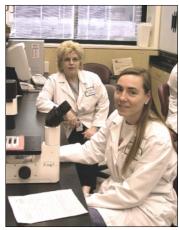
IN TESTIMONY WHEREOF, I have hereunto set my hand and caused to be affixed the Great Seal of the State of Indiana at the Capitol in Indianapolis on this 14th day of April, 2002.

BY THE GOVERNOR: Frank O'Bannon

Governor of Indiana

ATTEST: Sue Anne Gilroy Secretary of State



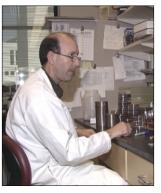








STAFF AT WORK: Top left (front to back): Michael Cross. Marc Yonker; John Yoon; Top Right (front to back): Veronica Erwin, Anna Espiritu-Truss: Above left: Pradip Patel; Above Right: (I. to r.) Rich Dufour, Evelyn Humphrey; Left (I. to r.): Priti Shah, Nick Proicou, Brent Barrett: Below left: Jon Radosevic; Below right: Louis Douglas and Beena Patel.





Pictured above are a few of the Indiana State Department of Health lab personnel who perform and interpret laboratory tests that help protect the health of Hoosiers.

Photos by Daniel Axler

'Principles of Epidemiology' Course Draws 200 Viewers Over IHETS

The first of three satellite telecasts that compose the course *Principles of Epidemiology* was beamed to approximately 200 viewers across Indiana on Friday, April 12. The program originated from television studios at Indiana University, Bloomington, and was telecast over the Indiana Higher Education Telecommunication System (IHETS).

Pam Pontones, ISDH Epidemiology Resource Center, oversaw coordination of the project. She also served as the moderator for viewer questions, which she stated for attendees and the two presenters, State Epidemiologist Bob Teclaw, D.V.M., Ph.D. and epidemiologist Jim Howell, D.V.M., M.P.H., following their presentations.

Dr. Howell presented the first segment, "Introduction to Epidemiology." He likened the work of the epidemiologist to that of a newspaper reporter who seeks to know the "what, when, where, who and why?" Among the topics presented, he distinguished the differences between descriptive and analytic epidemiology. He examined the elements of disease causation and discussed surveillance, investigation, analytic studies, and evaluation.

Dr. Teclaw presented "Frequency Measures Used in Epidemiology." He stated early in his presentation that learning the terminology of epidemiology is important because the words have precise technical meaning to epidemiologists. He defined the distinction between rates, ratios, and proportions. He discussed the meaning of line listings, frequency distributions, attack rates, prevalence rates, odds ratios, attributable risk, age-adjusted death rates—and the formulas used to calculate each.

The course has been organized around materials and a textbook provided by the Centers for Disease Control and Prevention (CDC). However, examples of case studies and applied problems had a distinctly Hoosier flavor. The concept behind the course is to show how epidemiological

principles apply to everyday workplace encounters to enable local public health workers to make sense of the data they record and monitor, and to provide confidence in selecting from 1:00 p.m. to 4:00 p.m.

Pontones says she anticipated 100 registrations and was surprised at the response when approximately 200 persons enrolled.







IHETS TELECAST SCREEN SHOTS of presenters (I. to r.) State Epidemiologist Bob Teclaw, D.V.M. and epidemiologist Jim Howell, D.V.M. appear above together with Pam Pontones, epidemiologist, who is coordinating the three satellite-uplink presentations being telecast from the Indiana University Bloomington campus.

appropriate responses, Pontones said.

She said that none of the viewers from the diverse statewide audience of professionals who attended the presentation had to travel far from their offices to reach a telecast reception location, due largely to the prevalence of reception sites. Most agricultural extension service office locations have equipment to receive IHETS telecasts.

Pontones regards the short travel times, supported by use of the IHETS network, a big plus for public health department personnel, especially for small staffs of local health departments in rural counties.

The advantages of IHETS is a plus for ISDH staff, too, Pontones says. She recalls a time not long ago when a series of eight regional conferences to deliver material to local health department staffs required the devotion of two months of ISDH staff time, which cut into time needed to meet routine staff responsibilities.

Epidemiology Resource Center staff decided it was time to present a basic course on epidemiology since it had been at least seven years from the date of the last course. Pontones recalls taking the course in 1993.

This first segment of *Principles of Epidemiology* was telecast on Friday, between 2:00 p.m. and 4:45. The remaining two telecasts will be presented Friday, April 26, from 12:00 p.m. to 3:00 p.m. and Friday, May 10,

Following the last of the three lectures, Pontones says that ISDH will hold three regional workshops in north, south, and central Indiana locations to provide exam materials for an open-book exam that may qualify participants for 4.2 continuing education credits (CEU) or 42 continuing medical education credits (CME) from the CDC. Course presenters will be available at these workshops to help attendees work problems and answer any technical questions they may have.

These follow-up Friday workshop dates and locations are:

NORTH: 5/17 1:00 - 4:00 p.m. Ivy Tech State College Rooms 1121 and 1122 220 Dean Johnson Boulevard South Bend, IN

SOUTH: 5/24 1:00 - 4:00 p.m. Indiana University Crestview Hall 111 4201 Grantline Road New Albany, IN

CENTRAL: 5/31 1:00 - 4:00 p.m. Indiana State Department of Health, Rice Auditorium 2 North Meridian Street Indianapolis, IN



Public Health Week—a Time to Reflect on Complex Goals

Public Health Week falls in April, an appropriate time to reflect on the many and complex goals of public health.

Health officials say the mission of public health is to prevent illness and injury with the goal of helping people live longer in good health, with the resulting benefit of reducing the need for medical services.

Health departments at the federal, state, and local levels are on record as trying to keep the environment healthy and safe and also publicly promoting good health practices that encourage the exercise of enlightened self-care by citizens.

Many health officials state they cannot hope for successful prevention efforts without active citizen participation to take responsibility for their own and their family's health.

No two health departments are identical, but among core services offered may be:

- Providing immunization clinics to prevent childhood diseases; influenza, pneumonia and other special screenings; and programs to contain disease or developmental problems arising from hearing, vision, or genetic abnormalities.
- Offering screenings and referral to detect and/or treat diabetes, breast and cervical cancer, prostate cancer, tuberculosis or asthma, hepatitis, osteoporosis, and sexually transmitted diseases like AIDS and syphilis.
- Licensing or certifying and monitoring health-care facilities and laboratories.
- Promoting emergency preparedness planning to help communities become ready to respond to a range of disasters including biological, chemical, or nuclear terrorist attacks.
- Promoting healthy lifestyles, which may include workshops or educational materials on:
 - Smoking cessation
 - Exercise and proper diet
 - Safety, like the careful opera-

tion of farm machinery, bicycles, or use of child car seats

- Violence
- Infant mortality
- Oral Health
- Teenage pregnancy
- Alcohol and drug use
- Sexually transmitted diseases
- Collecting, examining, and responding to data reports of bacterial disease that has epidemic potential if not responded to quickly and effectively, like *E.coli*, salmonella or shigellosis.
- Inspecting companies that vend food; providing workshops for employees of food companies in safe food handling, preparation, transportation, and storage.
- Issuing health advisories to warn of outbreaks of food poisoning, air pollution, epidemics, and rabies.
- Promoting prenatal care and postnatal surveillance, and special care programs to help ensure that babies are born healthy and that babies and children remain that way after birth.

There's Nothing 'Fishy' About This Fish Story

"We weighed a record carp this morning," said Larry Stump, ISDH Weights and Measures, in a call to the *Express* on Tuesday, April 9. The fish weighed 65.2 pounds on ISDH Weights and Measures Laboratory scales at the lab's Shadeland Avenue office location.

Stump said the carp broke the previous State record of 48 pounds. The fish was delivered to the labs by Ed Hughes, who caught the carp from a boat in a large farm pond near Mooresville at 5 a.m. on the morning of April 9.

Hughes reported that he was fishing for crappie when the carp hit an artificial plug on six-pound test line. Hughes told Stump that landing the big fish was accomplished by trapping it between the boat and the bank of the pond after wearing it down in an hour and 15-minute battle. Hughes landed the fish by slipping an oar through a gill to lift it from the water.

ISDH Weights and Measures weighed the fish on one of its portable scales.

Weights and Measures is responsible for enforcing Indiana code governing the maintenance of accurate scales and meters used in commerce to assure that grocery stores, pharmacies, and fuel merchants, like service stations and heating oil dealers, provide accurate weights and measures to customers.



RECORD CARP, measuring 46 7/8" long and 35 3/8" around, tips ISDH Weights and Measures scales at more than 65 pounds on April 9.

Photo by Jerry Clingaman



The Indiana State Department of Health Express is a bi-weekly publication for ISDH employees and stakeholders. To submit news items, call (317) 233-7336 or send information to: ISDH Express, Office of Public Affairs, 2 N. Meridian St., Section 2E, Indianapolis, IN 46204-3003. Inquiries should be directed to:

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